



Debit Order Agreement Form

Authorization Agreement

I hereby authorize **Ebotse Golf and Country Estate Home Owners Association** to initiate automatic withdrawals from my account at the financial institution named below.

This agreement will remain in effect until **Ebotse Golf and Country Estate Home Owners Association** receives a written notice of cancellation from me or my financial institution. All such withdrawals from my account by **Ebotse Golf and Country Estate Home Owners Association** shall be treated as though they had been signed by me personally.

I understand that the withdrawals hereby authorized will be processed through a computerized system provided by the South African Banks and I also understand that details of each withdrawal will be printed on my bank statement or on an accompanying voucher.

I agree to pay any bank charges relating to this debit order instruction.

This Authority may be cancelled by me by giving you thirty days notice in writing, sent by prepaid registered post, but I understand that I shall not be entitled to any refund of amounts which you have withdrawn while this authority was in force, if such amounts were legally owing to you.

Receipt of this instruction by you shall be regarded as receipt thereof by my bank (whichever it is or will be). The transaction amount referred to below will be amended automatically when a duly constituted Annual General Meeting OR Special General Meeting of the Home Owners' Association agrees to such amendment.

ASSIGNMENT: I acknowledge that the party hereby authorized to affect the drawing/s against my account may not cede or assign any of its rights to any third party without prior written consent of the authorized party.

NOTE: 2.5% discount applies to Levy only

Account Information

Name of Account Holder:	Stand:	Erf:
Name of Financial Institution:		
Branch:	Branch Number:	
Account Number:	Current <input type="checkbox"/>	Savings <input type="checkbox"/>

Contact Details

Physical Address:	Postal Address :
<hr/>	<hr/>
<hr/>	<hr/>
Cell Number:	Work Number:
<hr/>	<hr/>
Email Address:	
<hr/>	

Transaction Details

Transaction Amount:	Preferred Day of Month for Transaction:
<hr/>	<hr/>
On the: (day) of:	
(month) of:	
(year)	
Signed at:	<hr/>

Signature as used for signing cheques

As sited by
(Where legally necessary)

Capacity